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on December 1, 2003.



Daniel S. Kasten
Attorney for Applicant(s)
Registration No.: 45,363

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:	Milbrandt et al.	Group No.:	1646
Serial No.:	09/473,551	Atty. Docket No.:	
Filed:	December 28, 1999		
For:	GFR(alpha)1-RET Specific Agonists and Methods Therefor	Examiner:	Olga N. Chernyshev

Commissioner of Patents and Trademarks
P.O. Box 1450
Alexandria, VA 22313-1450

PREVIOUSLY SUBMITTED AMENDMENT AND RESPONSE

HONORABLE SIR:

Enclosed herewith is a copy of the Amendment and Response submitted July 21, 2003 via facsimile. Applicant hereby asserts that the amendment was in fact transmitted to the PTO on July 21, 2003, as indicated in the certificate of facsimile, and confirmed by the attached status report indicating that the response was successfully

transmitted on that date. Applicant hereby requests entry of the amendment and response.

Prompt and favorable consideration of this Amendment is respectfully requested.

Respectfully submitted,



Daniel S. Kasten, Reg. #45363
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St. Louis, Missouri 63101
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Fax: 314-552-7305


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

St. Louis, Missouri
July 21, 2003

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CERTIFICATE OF FACSIMILE

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Daniel S. Kasten
Attorney for Applicant(s)
Registration No.: 45,363

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:	Milbrandt et al.	Group No.:	1646
Serial No.:	09/473,551	Atty. Docket No.:	56029-9879
Filed:	December 28, 1999		
For:	GFR(alpha)1-RET Specific Agonists and Methods Therefor	Examiner:	Olga N. Chernyshev

Commissioner of Patents and Trademarks
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE

HONORABLE SIR:

Responsive to the official communication of April 28, 2003, Applicant submits the following Amendments and Remarks.

It is not believed that extensions of time are required beyond those which may otherwise be provided for in documents accompanying this Amendment. However, in

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the event that additional extensions of time are necessary to prevent abandonment of this application, then such extensions of time are hereby petitioned for under 37 C.F.R. § 1.136(a), and any fees required therefore are hereby authorized to be charged to our Deposit Account 20-0823.

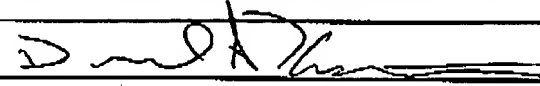
Please amend the above-identified application as set forth below.


Please type a plus sign (+) inside this box → PTO/SB/21 (08-00)
Approved for use through 10/31/2002. OMB 0851-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/473,551
		Filing Date	December 28, 1999
		First Named Inventor	Milbrandt et al.
		Group Art Unit	1646
		Examiner Name	Olga N. Chernyshev
Total Number of Pages in This Submission	1	Attorney Docket No.	56029/9879

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Charge Deposit Account -20-0823 <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> Affidavits/declarations(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Petition For Revival of an Application for Patent Abandoned Unintentionally Under 37 CFR 1.137(b))	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Request To Rescind Previous Nonpublication Request <input type="checkbox"/> Response to Notice of Allowability <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: <input checked="" type="checkbox"/> Commissioner is hereby authorized to charge fees in this application and any fees which may be required, or any overpayment, to Deposit Account 20-0823. I have enclosed a duplicate copy of this sheet <input type="checkbox"/> Amount: _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	Daniel S. Kasten C/O Thompson Coburn LLP
Signature	
Date	July 21, 2003

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			date: July 21, 2003
Typed or printed name	Daniel S. Kasten		
Signature		Date	July 21, 2003

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